

State of MISSISSIPPI

MARCH 2001



Nurse Aide Candidate Handbook

To navigate through this document, click on the Table of Contents entries, or use the bookmarks in the left column.

TABLE OF CONTENTS

PRINT HANDBOOK

ISBN 9998520045

ASI # 0725-00 3/01

Getting Started

NACES

Call Monday through Friday 7:30 am to 4:30 pm (Central Time) to:

- obtain a handbook
- obtain information about registering for the nurse aide certification examination
- obtain or complete an application
- register for the certification examination
- cancel or change a scheduled examination
- arrange special testing accommodations
- change your current address or name prior to testing
- request an excused absence

NACES PLUS Foundation

Mississippi NNAAP™

7600 Burnet Road, Suite 440

Austin, TX 78757-1292

(800) 579-3321

Fax (512) 452-3842

Mississippi Department of Health, Division of Health Facilities Licensure and Certification

Call 8:00 am to 5:00 pm (central time) to:

- obtain information on official regulations and guidelines for nurse aides
- obtain approval to test if you are an out-of-state or foreign RN or LPN who was trained outside of Mississippi

Mississippi Department of Health

Division of Health Facilities Licensure and Certification

570 East Woodrow Wilson Blvd., Suite 214

Jackson, MS 39215-1700

(601) 576-7300

Fax (601) 576-7350

ASI (Assessment Systems, Inc.)

Call Monday through Friday 7:00 am to 4:00 pm, (Central Time) to:

- obtain information regarding your score report
- change your current address or name after testing
- request a duplicate score report or certificate
- obtain information regarding recertification
- obtain or complete a reciprocity application
- check the current listing of the Mississippi Nurse Aide Registry

ATTN: MS NNAAP™

Assessment Systems, Inc.

PO Box 13785

Philadelphia, PA 19101-3785

(888) 204-6213

and

Interactive Voice Response (IVR) System

to check Nurse Aide Registry status

(888) 204-6215

TDD-Telecommunication Devices for the Deaf

(800) 274-2617 See page 4 for details

Table of Contents

GETTING STARTED	inside front cover
INTRODUCTION	1
National Nurse Aide Assessment Program	1
Exam Overview	1
ELIGIBILITY	2
Eligibility Routes	2
APPLICATION AND SCHEDULING	3
Filling Out an Application	3
Exam Fees	4
Exam Scheduling	4
Admission Tickets	4
Telecommunication Devices for the Deaf	5
Testing Locations	5
ADA Accommodations	5
CANCELLATION AND LATENESS	5
Cancellation	5
Absence Policy	6
Weather Emergencies	6
Lateness	6
THE SKILLS EVALUATION	7
What to Expect	7
Skills Listing	8
THE WRITTEN EXAM	24
Written Exam Content Outline	25
Sample Questions	26
EXAM DAY	27
What to Bring	27
Security	27
Testing Policies	27

Table of Contents continued on next page ➤

SCORE REPORTING28

Test Results	28
After You Take the Skills Evaluation	28
After You Take the Written Exam	28
Lost Certificates	29
Retesting Rules	29

THE REGISTRY30

Change of Address or Name	30
Certification by Reciprocity	30
Recertification	31
Renewal Notification	31
Recertification Process	31

APPENDIX

Request for Duplicate Score Report, Handscore, or Duplicate Certificate Form	33
Change of Address or Name Form	35

Neither the Mississippi State Department of Health, Division of Health Facilities Licensure and Certification, NACES, nor ASI discriminates on the basis of age, sex, race, creed, disabling condition, religion, national origin, or any other protected characteristics.

Copyright © 2001 Assessment Systems, Inc.
A Harcourt Company
All Rights Reserved.

Introduction

This handbook is designed for candidates seeking nurse aide certification in Mississippi. It describes the process of applying for and taking the National Nurse Aide Assessment Program (NNAAP™) examination.

The Mississippi Department of Health, Division of Health Facilities Licensure and Certification, has contracted with Assessment Systems, Inc. (ASI), a Harcourt company nationally recognized as a leading provider of assessment services to regulatory agencies and national associations, to develop, score, and report the results of the NNAAP™ examination for the Mississippi Nurse Aide Registry. NACES will be working with ASI to schedule and administer the examination.

National Nurse Aide Assessment Program

ASI, together with the National Council of State Boards of Nursing, Inc., has developed NNAAP™, the National Nurse Aide Assessment Program. NNAAP™ was developed to meet the nurse aide evaluation requirement of federal and state laws and regulations.

The Nursing Home Reform Act, adopted by Congress as part of the Omnibus Budget Reconciliation Act of 1987 (OBRA '87), is designed to improve the quality of care in long-term health care facilities and to define training and evaluation standards for nurse aides who work in long-term care facilities. Each state is responsible for following the terms of this federal law.

NNAAP™ measures nurse aide related knowledge, skills, and abilities. The NNAAP™ certification examination is made up of both a Written (or Oral) Examination and a Skills Evaluation. The purpose of the NNAAP™ certification examination is to make sure that you understand and can safely perform the job of an entry-level nurse aide.

Exam Overview

The two parts of the examination process, the Skills Evaluation and the Written Examination, will be administered on the same day. You must pass both parts in order to be certified and listed on the Mississippi Nurse Aide Registry.

At the Skills Evaluation you will be asked to perform five (5) randomly selected nurse aide skills. You will be given twenty-five (25) minutes to complete the five (5) skills. You will be rated on these skills by a Nurse Aide Evaluator. A complete listing of the skills is shown on pages 8-23.

The Written Examination consists of seventy (70) multiple-choice questions written in English. Sample examination questions are provided in this handbook. An Oral Examination may be taken in place of the Written Examination if you have difficulty reading English. The Oral Examination consists of sixty (60) multiple-choice questions and ten (10) multiple-choice reading compre-

hension questions. If you want to take the Oral Examination, you must request so when you submit your application.

See *The Skills Evaluation* and *The Written Exam* for more details about the NNAAP™ examination.

Eligibility

Eligibility Routes

You are eligible to apply to take the National Nurse Aide Assessment Program examination for certification as a nurse aide in Mississippi if you are a:

E1 New Nurse Aide: An individual who has completed a Mississippi-approved nurse aide training program and has never been certified as a nurse aide; or a lapsed nurse aide who retested under Eligibility Route E5 and failed either or both parts of the NNAAP™ examination on the first try; or a nurse aide denied reciprocity who retested under Eligibility Route E6 and failed either or both parts of the NNAAP™ examination on the first try. A completed application, fees, and a copy of the certificate of completion or an original letter from the training program stating that training has been completed must be submitted to NACES. You have twenty-four (24) months from the completion date of the training program to take and pass both parts of the examination. *However, if you are employed by a long-term care facility participating in Medicaid/Medicare, you must be certified within 4 months of being hired.*

E2 Graduate Nurse: An individual who has completed a Mississippi-approved LPN or RN training program. Graduate nurses must submit an application, fees, and a copy of an LPN or RN training program completion diploma or certificate to be eligible to take both parts of the examination. *A nurse aide employed by a long-term care facility participating in Medicaid/Medicare must be certified within 4 months of being hired.*

E3 Out-of-State or Foreign LPN or RN: An individual who has completed an LPN or RN program outside the State of Mississippi. You must obtain an application that is signed by the Mississippi State Department of Health, Division of Health Facilities Licensure and Certification. The signed application and fees must be submitted to NACES.

E4 Reciprocity: Reciprocity is a process by which a certified nurse aide from another state may qualify for certification in the State of Mississippi by virtue of his or her status in that other state.

You are eligible for reciprocity if you have been entered onto a nurse aide registry in a state other than Mississippi in

accordance with the training and competency evaluation requirements of OBRA '87, as amended, and if you are currently listed on another state's registry as active and in good standing. (see details on page 30)

E5 Lapsed Nurse Aide: An individual whose certification is lapsed on the Mississippi Nurse Aide Registry and who must retest in order to become active on the Registry. If you fail either the Written Examination or Skills Evaluation (either part of the NNAAP™ examination) on the first try, you will be required to complete a Mississippi-approved nurse aide training program *before* being allowed to retest under Eligibility Route E1 as a New Nurse Aide.

E6 Nurse Aide Denied Reciprocity: An individual who was denied reciprocity in Mississippi and must retest in order to be added to the Mississippi Nurse Aide Registry. If you fail either the Written Examination or Skills Evaluation (either part of the NNAAP™ examination) on the first try, you will be required to complete a Mississippi-approved nurse aide training program before being allowed to retest under Eligibility Route E1 as a New Nurse Aide.

Application and Scheduling

Filling Out an Application

- You may get an application from your nursing facility employer or from your nurse aide training program or by contacting NACES.
- You are responsible for completing the appropriate sections of the application. You may ask someone from your nurse aide training program or employer for assistance in completing the application.
- If you need help or have any questions about the application, please contact a NACES Customer Service Representative at (800) 579-3321.
- All required documentation (application, fees and, if necessary, a copy of your training program completion certificate) must be received twelve (12) business days before the test date.
- Mail your completed application, required documents, and appropriate fee **together in one envelope** to:

NACES
MS NNAAP™
7600 Burnet Road, Suite 440
Austin, TX 78757-1292

Exam Fees

The fees listed below have been established for the National Nurse Aide Assessment Program certification examination in Mississippi.

Skills Evaluation & Written Examination	(both)	\$88
Skills Evaluation & Oral Examination	(both)	\$98
Written Examination ONLY	(retest)	\$39
Skills Evaluation ONLY	(retest)	\$49
Oral Examination ONLY	(retest)	\$49
Recertification		\$25
Reciprocity (from another state)		\$25
Duplicate Score Report/Certificate		\$15
Handscore		\$15

First-time test takers, lapsed nurse aides, and nurse aides denied reciprocity must pay for both the Written Examination and Skills Evaluation

Under federal and Mississippi state laws, candidates employed as nurse aides in nursing homes that participate in Medicaid/Medicare programs are prohibited from paying their examination fees. Employers must pay the initial examination fee and any retest fee for those candidates in their employ as nurse aides. Candidates not employed as nurse aides are permitted to pay their own examination fee.

Payment must be made in the form of a money order or certified check made payable to NACES. Even if it is from your employer, the money order or certified check must display your name so it can be applied to your examination. If you are not currently employed at a nursing home, you may pay the fee yourself. Company checks may pay for more than one candidate. **Personal checks and cash will not be accepted.** Fees are nonrefundable and nontransferable once submitted to NACES because they cover the administrative costs of registration and testing.

Exam Scheduling

Once NACES receives your application, required documents, and fees, they will schedule you for testing. You will not be scheduled to test until all required materials (application, fees and documents) are received. NACES will mail your Admission Ticket to the address listed on your application within forty-eight (48) hours after they receive your required material.

Admission Tickets

Your Admission Ticket has important information about the examination. If you do not get your ticket within ten (10) business days, call NACES. NACES is **NOT** responsible for lost, misdirected, or delayed mail.

Telecommunication Devices for the Deaf (TDD)

ASI is equipped with TDD (Telecommunications Devices for the Deaf) to assist deaf and hearing-impaired candidates. TDD calling is available during all ASI Customer Care hours through a special toll-free number, (800) 274-2617. This TDD phone option is for the express use of individuals equipped with compatible TDD machinery.

Testing Locations

Exam administration is given by NACES at Regional Test Sites. The following is a listing of Regional Test Sites:

Decatur	Monthly
Grenada	Bi-Weekly
Gulfport	Bi-Weekly
Hattiesburg	2 times per month
Jackson	Bi-Weekly
Senatobia	Bi-Weekly
Summit	Monthly
Tupelo	2 times per month

Additional information about test sites may be obtained by calling NACES at (800) 579-3321.

Availability of testing is subject to change

ADA Accommodations

ASI certifies that it complies with the provisions of the Americans with Disabilities Act (42 USCS Section 12101 *et seq.*). If you have a disability, you may ask for special arrangements for testing when you apply. All requests must be approved in advance by NACES. Be sure to explain the specific type of help you need and enclose proof of the need (diagnosed disability) from your health care provider. Nurse Aide Evaluators administering the Skills Evaluation will be prepared to meet the needs of nurse aide candidates who have disabling conditions.

Cancellation and Lateness

Cancellation

If you can't go to your scheduled test, ***you must call NACES by 12 noon at least four (4) business days*** before the test date to reschedule. Saturday and Sunday are not business days. If you do not call NACES at least four (4) business days in advance of your test date to reschedule, and do not show up for your scheduled test date, your fee will NOT be refunded and cannot be transferred to a new test date. You may **NOT** give your test date to another person.

If you do notify NACES in time, there is no penalty and your fee may be transferred to your new test date. If your employer paid your testing fee, you should tell them about missing the test and/or rescheduling. Let them know how you have handled rescheduling and when you plan to retest.

Absence Policy

Since unexpected situations sometimes occur, NACES will consider excusing an absence from a scheduled test for a serious illness or an emergency.

Requests for excused absences must be made in writing to NACES within ten (10) business days following the scheduled test date. Verification of your absence from an appropriate source is required. For example, if you have jury duty, you must supply a copy of your court notice. Acceptable excused absences are as follows:

- Illness of yourself or a member of your immediate family
- Death in the family
- Disabling traffic accident
- Court appearance or jury duty
- Military duty
- Weather emergency

NACES's decision regarding cancellations will be final.

Weather Emergencies

Examination administration will be delayed or cancelled only in emergencies. If severe weather or a natural disaster makes the test site inaccessible or unsafe, the exam administration will be cancelled. If testing has been cancelled, you will be rescheduled for the next available examination at that site.

Lateness

Plan to arrive about thirty (30) minutes before the examination starts. If you are late for your scheduled test, or do not bring all your completed documentation, you will NOT be allowed to test and your examination fee will NOT be returned. Please note that if you are late for your Written Examination, but arrive on time for you Skills Evaluation, you will be allowed to take the Skills Evaluation.

The Skills Evaluation

What to Expect

- **Check-in**

When you arrive, you will present your Admission Ticket and appropriate identification to the Skills Evaluation proctor. Once you are admitted, you will be asked to report to the Skills Evaluation area.

- **Setting**

The Skills Evaluation is set up to resemble an actual care-giving situation. The Skills Evaluation area will look similar to your work setting. It will have all the equipment necessary to perform the assigned skills. You will have the opportunity to view the equipment and how it works.

- **The Tasks**

You will be asked to perform five (5) nurse aide skills. These skills are randomly chosen from the complete skills listing on pages 8-23 of this handbook. Each skill represents a task that you will be asked to perform in your job and has been broken down into a series of steps. Some tasks have **Critical Element Steps** (highlighted in bold type on the skills listing). Critical Element Steps are important steps that must be performed correctly in order for you to pass the skill. You will have twenty-five (25) minutes to demonstrate all five (5) skills. You must successfully demonstrate all five (5) skills in order to pass the Skills Evaluation.

- **Who Will Evaluate My Skills?**

A trained Nurse Aide Evaluator will rate your performance of the skills. If you make a mistake, say so, and you will be allowed to go back and begin from where you feel you made the error. You will have one opportunity during each skill to correct a mistake. The Nurse Aide Evaluator will not answer questions during the Skills Evaluation and will not tell you whether you performed a skill correctly. You may not receive help from anyone during the Skills Evaluation. If you do have any questions, please ask them *before* the Skills Evaluation begins.

See page 8 for the complete skills listing.

- **Who Will Act as a Client?**

The part of the “client” will be played by a client-actor/volunteer pretending to be a weakened elderly person. While you perform the tasks, speak to the client-actor/volunteer as you would speak to an actual client in a nurse aide work setting. You are encouraged to speak to the client-actor/volunteer not only because it is part of quality care, but also because it will help you to relax as you perform the skills.

Skills Listing

The following is a listing of skills which you may be asked to demonstrate. Following each skill is a list of the steps which should be performed to demonstrate the skill. **Critical Element Steps** are marked in bold type. If you leave out a Critical Element Step or do not perform a Critical Element Step properly, you will not pass the skill.

Each **skill scenario** consists of five (5) skills. You must successfully complete five (5) out of five (5) skills in order to pass the Skills Evaluation.

Please note: Where the word “client” appears, it refers to the person **receiving** care.

WASHES HANDS

SKILL 1

- 1 Turns on water at sink
- 2 Wets hands and wrists thoroughly
- 3 Applies skin cleanser or soap to hands
- 4 Lathers all surfaces of fingers and hands, including above the wrists, producing friction, for at least 10 (ten) seconds**
- 5 Rinses all surfaces of hands and wrists without contaminating hands
- 6 Uses clean, dry paper towel to dry all surfaces of hands, wrists, and fingers, without contaminating hands
- 7 Uses clean, dry paper towel; clean, dry area of paper towel; or knee to turn off faucet, without contaminating hands
- 8 Disposes of used paper towel(s) in wastebasket immediately after shutting off faucet

MEASURES AND RECORDS WEIGHT OF AMBULATORY CLIENT

SKILL 2

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Starts with scale balanced at zero before weighing client
- 5 Assists client to step up onto center of the scale
- 6 Determines client's weight
- 7 Assists client off scale before recording weight
- 8 Before leaving client, places signaling device within client's reach
- 9 Records weight within \pm (plus or minus) 2 lbs. of evaluator's reading**
- 10 Washes hands as final step

PROVIDES MOUTH CARE

SKILL 3

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Before providing mouth care, ensures client is in an upright sitting position
- 6 Puts on gloves before cleaning client's mouth
- 7 Places towel across client's chest before providing mouth care
- 8 Moistens toothbrush or toothette
- 9 Applies toothpaste to toothbrush or toothette
- 10 Cleans entire mouth (including tongue and all surfaces of teeth), using gentle motions**
- 11 Assists client to rinse his or her mouth
- 12 Holds emesis basin to client's chin
- 13 Wipes client's mouth and removes towel
- 14 Disposes of soiled linen in soiled linen container
- 15 Maintains clean technique with placement of toothbrush or toothette throughout procedure
- 16 Cleans and returns implements to proper storage
- 17 After completing procedure, removes gloves without contaminating self and disposes of gloves appropriately
- 18 Repositions head of bed to client's choice
- 19 Before leaving client, places signaling device within client's reach
- 20 Leaves bed in lowest position
- 21 Washes hands as final step

DRESSES CLIENT WITH AFFECTED RIGHT ARM

SKILL 4

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy during procedure with curtain, screen or door
- 5 Asks client which outfit he/she would like to wear and dresses him/her in outfit of choice
- 6 Removes client's gown without completely exposing client
- 7 Assists client to put the right (affected) arm through the right sleeve of the shirt, sweater, or slip before placing garment on left (unaffected) arm**

- 8 Assists client to put on skirt, pants, or dress
- 9 Before standing client, places bed at a safe and appropriate level for client
- 10 Before standing client, applies non-skid footwear
- 11 Puts on all items, moving client's body gently and naturally, avoiding force and over-extension of limbs and joints
- 12 Finishes with client dressed appropriately (e.g., clothing right side out, zippers/buttons fastened, etc.) and seated
- 13 Places gown in soiled linen container
- 14 Before leaving client, places signaling device within client's reach
- 15 Washes hands as final step

TRANSFERS CLIENT FROM BED TO WHEELCHAIR

SKILL 5

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy during procedure with curtain, screen, or door
- 5 Positions wheelchair close to bed with arm of the wheelchair almost touching the bed
- 6 Before transferring client, folds up footrests
- 7 Before transferring client, places bed at a safe and appropriate level for the client
- 8 Before transferring client, locks wheels on wheelchair**
- 9 Before transferring client, supports client's back and hips and assists client to sitting position with feet flat on the floor
- 10 Before transferring client, puts non-skid footwear on client and securely fastens
- 11 With transfer (gait) belt: Stands in front of client, positioning self to ensure safety of candidate and client during transfer (e.g., knees bent, feet apart, back straight), places belt around client's waist, and grasps belt
Without transfer belt: Stands in front of client, positioning self to ensure safety of candidate and client during transfer (e.g., knees bent, feet apart, back straight, arms around client's torso under the arms)
- 12 Provides instructions to enable client to assist in transfer
- 13 Braces client's lower extremities to prevent slipping
- 14 Counts to three (or says other prearranged signal) to alert client to begin transfer
- 15 On signal, gradually assists client to stand
- 16 Assists client to pivot to front of wheelchair with back of client's legs against wheelchair
- 17 Lowers client into wheelchair
- 18 Repositions client with hips touching back of wheelchair and removes transfer belt, if used

- 19 Positions client's feet on footrests
- 20 Before leaving client, places signaling device within client's reach
- 21 Washes hands as final step

ASSISTS CLIENT TO AMBULATE

SKILL 6

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 **Before ambulating, puts on and properly fastens non-skid footwear**
- 5 Before standing client, places bed at a safe and appropriate level for the client
- 6 Stands in front of and facing client
- 7 Braces client's lower extremities
- 8 With transfer (gait) belt: Places belt around client's waist and grasps the belt, while assisting client to stand
Without transfer belt: Places arms around client's torso under client's armpits, while assisting client to stand
- 9 With transfer belt: Walks slightly behind and to one side of client for the full distance, while holding onto the belt
Without transfer belt: Walks slightly behind and to one side of client for the full distance, with arm supporting client's back
- 10 After ambulation, assists client to a position of comfort and safety in bed and removes transfer belt, if used
- 11 Before leaving client, places signaling device within client's reach
- 12 Washes hands as final step

CLEANS AND STORES DENTURES

SKILL 7

- 1 Washes hands before beginning procedure
- 2 Puts on gloves before handling dentures
- 3 Before handling dentures, protects dentures from possible breakage (e.g., by lining sink/basin with a towel/washcloth or by filling it with water)
- 4 Rinses dentures in cool running water before brushing them
- 5 Applies toothpaste or denture cleanser to toothbrush
- 6 Brushes dentures on all surfaces
- 7 Rinses all surfaces of dentures under cool running water
- 8 Rinses denture cup before placing clean dentures in it
- 9 Places dentures in clean denture cup with solution or cool water
- 10 Cleans and returns implements to proper storage

- 11 Places dentures in denture cup then returns denture cup to proper storage
- 12 Maintains clean technique with placement of dentures and toothbrush throughout procedure
- 13 Disposes of sink liner in appropriate container or drains sink
- 14 After completing procedure, removes gloves without contaminating self and disposes of gloves appropriately
- 15 Washes hands as final step

PERFORMS PASSIVE RANGE OF MOTION (ROM) FOR ONE SHOULDER

SKILL 8

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Supports client's arm at elbow and wrist, while performing range of motion for shoulder
- 6 Raises client's straightened arm toward ceiling and back toward head of bed and returns to flat position (flexion/extension)
(REPEAT AT LEAST 3 TIMES)
- 7 Moves client's straightened arm away from client's side of body toward head of bed, and returns client's straightened arm to midline of client's body (abduction/adduction)
(REPEAT AT LEAST 3 TIMES)
- 8 Places client's flexed elbow at client's shoulder level, rotates forearm toward head of the bed and rotates forearm down toward hip (rotation)
(REPEAT AT LEAST 3 TIMES)
- 9 While supporting the limb, moves joint gently, slowly, and smoothly through the range of motion to the point of resistance, discontinuing exercise if pain occurs**
- 10 Leaves bed in lowest position
- 11 Before leaving client, places signaling device within client's reach
- 12 Washes hands as final step

PERFORMS PASSIVE RANGE OF MOTION (ROM) FOR ONE KNEE AND ONE ANKLE

SKILL 9

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Supports client's leg at knee and ankle while performing range of motion for knee
- 6 Bends the knee to the point of resistance and then returns leg flat to bed (extension/flexion)
(REPEAT AT LEAST 3 TIMES)
- 7 Supports foot and ankle while performing range of motion for ankle
- 8 Keeping foot on bed, pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes point down (plantar flexion)
(REPEAT AT LEAST 3 TIMES)
- 9 While supporting the limb, moves joints gently, slowly, and smoothly through the range of motion to the point of resistance, discontinuing exercise if pain occurs**
- 10 Leaves bed in lowest position
- 11 Before leaving client, places signaling device within client's reach
- 12 Washes hands as final step

MEASURES AND RECORDS URINARY OUTPUT

SKILL 10

- 1 Washes hands as first step
- 2 Puts on gloves before handling bedpan
- 3 Pours the contents of the bedpan into measuring container without spilling or splashing any of the urine
- 4 Measures the amount of urine while keeping container level
- 5 After measuring urine, empties contents of measuring container into toilet without splashing
- 6 Rinses measuring container and pours rinse water into toilet
- 7 Rinses bedpan and pours rinse water into toilet
- 8 Returns bedpan and measuring container to proper storage
- 9 After storing bedpan and measuring container, removes and disposes of gloves without contaminating self
- 10 Washes hands before recording output
- 11 Records contents of container in output column within \pm (plus or minus) 25 ccs/mls of evaluator's reading**

ASSISTS CLIENT WITH USE OF BEDPAN

SKILL 11

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Before placing bedpan, lowers head of bed
- 6 Places bedpan correctly under client's buttocks (Standard bedpan: Position bedpan so wider end of pan is aligned with client's buttocks; Fracture pan: Position bedpan with handle toward foot of bed)**
- 7 Raises head of bed after placing bedpan under client
- 8 Puts toilet tissue within client's reach
- 9 Leaves signaling device within client's reach while client is using bedpan
- 10 Asks client to signal when finished
- 11 Lowers head of bed before removing bedpan
- 12 Puts on gloves before removing bedpan
- 13 Removes bedpan, empties contents into toilet
- 14 Rinses bedpan, pouring rinse water into toilet, and returns to proper storage
- 15 After storing bedpan, removes and disposes of gloves without contaminating self
- 16 Assists client to wash hands after using bedpan and disposes of soiled washcloth or wipes in proper container
- 17 Leaves bed in lowest position
- 18 Before leaving client, places signaling device within client's reach
- 19 Avoids unnecessary exposure of client throughout procedure
- 20 Washes hands as final step

PROVIDES PERINEAL CARE FOR INCONTINENT CLIENT

SKILL 12

Steps 9 through 13 are order-dependent

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Tests water temperature and ensures it is safe and comfortable before washing, and adjusts if necessary

- 6 Puts on gloves before contact with linen, incontinent pad, and/or client
- 7 Protects client from wet incontinent pad while keeping bed clean and dry (e.g., rolls pad into itself with wet side in/dry side out or removes pad and uses clean, dry pad or protective linen)
- 8 Exposes perineal area
- 9 **Washes entire perineal area with soapy washcloth, moving from front to back, while using a clean area of the washcloth or clean washcloth for each stroke**
- 10 **Rinses entire perineal area, moving from front to back, while using a clean area of the washcloth or clean washcloth for each stroke**
- 11 Dries entire perineal area moving from front to back, using a blotting motion with towel
- 12 Turns client on side
- 13 Washes, rinses, and dries buttocks and peri-anal area without contaminating perineal area
- 14 Removes wet incontinent pad or protective linen after drying buttocks
- 15 Places a dry incontinent pad underneath client
- 16 Repositions client
- 17 Disposes of linen and incontinent pad in proper containers
- 18 Empties, rinses, and wipes basin and returns to proper storage
- 19 Removes and disposes of gloves without contaminating self after returning basin to storage
- 20 Before leaving client, places signaling device within client's reach
- 21 Leaves bed in lowest position
- 22 Avoids unnecessary exposure of client throughout procedure
- 23 Washes hands as final step

PROVIDES CATHETER CARE

SKILL 13

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Tests water in basin to determine if it is safe and comfortable before washing, and adjusts if necessary
- 6 Puts on gloves before contact with linen and/or client
- 7 Exposes area surrounding catheter only
- 8 Places towel or pad under catheter tubing before washing
- 9 Applies soap to wet washcloth

- 10 Holds catheter near meatus to avoid tugging the catheter
- 11 Cleans at least four inches of catheter nearest meatus, moving in only one direction (i.e., away from meatus) using a clean area of the cloth for each stroke
- 12 Rinses at least four inches of catheter nearest meatus, moving in only one direction (i.e., away from meatus) using a clean area of the cloth for each stroke
- 13 Disposes of linen in proper containers
- 14 Empties, rinses, and wipes basin and returns to proper storage
- 15 Removes and disposes of gloves without contaminating self after returning basin to storage
- 16 Before leaving client, places signaling device within client's reach
- 17 Leaves bed in lowest position
- 18 Avoids unnecessary exposure of client throughout procedure
- 19 Washes hands as final step

TAKES AND RECORDS ORAL TEMPERATURE

SKILL 14

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Holds oral thermometer by stem
- 5 Before inserting oral thermometer in client's mouth, shakes oral thermometer down to 96 degrees F or lower
- 6 Inserts bulb end of oral thermometer into client's mouth, under tongue and to one side
- 7 Tells client to hold oral thermometer in mouth with lips closed and assists as necessary
- 8 Leaves oral thermometer in place for at least 3 minutes
- 9 Reads oral thermometer before cleaning thermometer
- 10 Cleans oral thermometer and/or returns it to container for used thermometers
- 11 Before leaving client, places signaling device within client's reach
- 12 Washes hands after cleaning oral thermometer and/or returning it to container for used thermometers
- 13 **Records oral temperature within \pm (plus or minus) 0.2 degrees of evaluator's reading**

TAKES AND RECORDS RADIAL PULSE, AND COUNTS AND RECORDS RESPIRATIONS

SKILL 15

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Places fingertips on thumb side of client's wrist to locate pulse
- 5 Counts beats for 1 full minute
- 6 Records pulse rate within \pm (plus or minus) 4 beats of evaluator's reading**
- 7 Counts respirations for 1 full minute
- 8 Records respiration rate within \pm (plus or minus) 2 breaths of evaluator's reading**
- 9 Before leaving client, places signaling device within client's reach
- 10 Washes hands as final step

TAKES AND RECORDS CLIENT'S BLOOD PRESSURE (One-Step Procedure)

SKILL 16

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Before using stethoscope, inspects diaphragm and earpieces of stethoscope with alcohol
- 5 Positions client arm with palm up
- 6 Places blood pressure cuff snugly on client's upper arm, with sensor placed over artery
- 7 Locates brachial pulse with fingertips
- 8 Places diaphragm over brachial artery
- 9 Places earpieces of stethoscope in ears
- 10 Inflates cuff to no more than 30 mm Hg above the point at which pulse is first heard or felt
- 11 Deflates cuff slowly
- 12 Before leaving client, places signaling device within client's reach
- 13 Records both systolic and diastolic pressures each within \pm (plus or minus) 4 mm of evaluator's reading**
- 14 Washes hands as final step

TAKES AND RECORDS CLIENT'S BLOOD PRESSURE (Two-Step Procedure)

SKILL 17

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Before using stethoscope, wipes diaphragm and earpieces of stethoscope with alcohol
- 5 Positions client's arm with palm up
- 6 Places blood pressure cuff snugly on client's upper arm, with sensor placed over artery
- 7 Locates radial pulse with fingertips
- 8 Inflates cuff to no more than 30 mm Hg above the point where pulse is last felt
- 9 Deflates cuff
- 10 Locates brachial pulse
- 11 Places diaphragm over brachial artery
- 12 Places earpieces of stethoscope in ears
- 13 Inflates cuff to no more than 30 mm Hg above point at which pulse was last felt
- 14 Deflates cuff slowly
- 15 Before leaving client, places signaling device within client's reach
- 16 Records both systolic and diastolic pressures each within \pm (plus or minus) 4 mm of evaluator's reading**
- 17 Washes hands as final step

PUTS ONE KNEE-HIGH ELASTIC STOCKING ON CLIENT

SKILL 18

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy during procedure with curtain, screen, or door
- 5 Turns stocking inside-out at least to heel area
- 6 Places foot of stocking over toes, foot, and heel
- 7 Pulls top of stocking over foot, heel, and leg
- 8 Moves client's foot and leg gently and naturally, avoiding force and over-extension of limb and joints throughout the procedure
- 9 Finishes procedures with no twists or wrinkles and stocking properly placed**
- 10 Before leaving client, places signaling device within client's reach
- 11 Washes hands as final step

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Places clean linen on clean surface within candidate's reach (e.g., bedside stand, overbed table, or chair)
- 5 Provides for client's privacy throughout procedure with curtain, screen, or door
- 6 Lowers head of bed before moving client
- 7 Loosens top linen from the end of the bed or working side
- 8 After raising side rail, assists client to turn onto side, moving away from candidate toward raised side rail
- 9 Loosens bottom soiled linen on working side
- 10 Moves bottom soiled linen toward center of the bed
- 11 Places and tucks in clean bottom linen or fitted bottom sheet on working side (If flat sheet is used, tucks in at top and working side)
- 12 After raising side rail, assists client to turn onto clean bottom sheet
- 13 Removes soiled bottom linen, avoiding contact with clothes, and places it in an appropriate location within the room
- 14 Pulls and tucks in clean bottom linen, finishing with bottom sheet free of wrinkles
- 15 Covers client with clean top sheet and appropriately removes soiled top sheet
- 16 Finishes with the clean linen anchored and centered
- 17 Replaces pillowcase
- 18 Before leaving client, places signaling device within client's reach
- 19 Leaves bed in lowest position
- 20 Disposes of soiled linen in soiled linen container
- 21 Avoids contamination of clean linen throughout procedure
- 22 Avoids unnecessary exposure of client throughout procedure
- 23 Washes hands as final step

PROVIDES FOOT CARE

SKILL 20

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy during procedure with curtain, screen, or door
- 5 Tests water temperature and ensures it is safe and comfortable before placing client's foot in water, and adjusts if necessary
- 6 Completely submerges foot in water
- 7 Removes foot from water, washing entire foot, including between the toes, with soapy washcloth
- 8 Rinses entire foot, including between the toes
- 9 Dries entire foot, including between the toes
- 10 Puts lotion in hand
- 11 Warms lotion by rubbing hands together
- 12 Massages lotion into entire foot (top and bottom), removing excess (if any) with a towel
- 13 Assists client to replace sock
- 14 Supports foot and ankle properly throughout procedure
- 15 Before leaving client, places signaling device within client's reach
- 16 Empties, rinses, and wipes bath basin, and returns to proper storage
- 17 Disposes of soiled linen in soiled linen container
- 18 Washes hands as final step

PROVIDES FINGERNAIL CARE

SKILL 21

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Tests water temperature and ensures it is safe and comfortable before immersing client's fingers in water, and adjusts if necessary
- 5 Immerses client's fingers in basin of water which is placed at a comfortable level for client
- 6 Dries client's hand, including between fingers

- 7 Cleans under nails with orangewood stick
- 8 Wipes orangewood stick on towel after each nail
- 9 Grooms nails with file or emery board
- 10 Finishes with nails smooth and free of rough edges
- 11 Before leaving client, places signaling device within client's reach
- 12 Empties, rinses, and wipes basin, and returns to proper storage
- 13 Disposes of soiled linen in soiled linen container
- 14 Washes hands as final step

FEEDS CLIENT WHO CANNOT FEED SELF

SKILL 22

- 1 Washes hands before feeding client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Before feeding client, ensures client is in an upright sitting position
- 5 Before feeding, picks up name card and verifies that client has received the tray prepared for him/her
- 6 Before feeding client, assists client to put on clothing protector
- 7 Sits at client's eye level
- 8 Alternates types of food offered, allowing for client preferences (i.e., does not feed all of one type before offering another type)
- 9 Offers the food in bite-size pieces
- 10 Makes sure client's mouth is empty before next bite of food or sip of beverage
- 11 Offers beverage to client throughout the meal
- 12 Talks with client during meal
- 13 Wipes food from client's mouth and hands as necessary and at the end of the meal
- 14 Removes clothing protector and disposes in proper container
- 15 Before leaving client, places signaling device within client's reach
- 16 Removes food tray
- 17 Washes hands as final step

POSITIONS CLIENT ON SIDE

SKILL 23

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Before turning client, lowers head of bed
- 6 Before turning client, moves client's body toward self
- 7 After raising side rail, slowly rolls client onto side toward raised side rail while supporting client's body
- 8 **Positions client in proper body alignment**
(Proper body alignment requires:
 - head supported by pillow
 - shoulder adjusted so client is not lying on arm
 - top arm supported
 - back supported by supportive device
 - top knee flexed
 - top leg supported by supportive device with hip in proper alignment))
- 9 Covers client with top linen
- 10 Before leaving client, places signaling device within client's reach
- 11 Leaves bed in lowest position
- 12 Washes hands as final step

GIVES MODIFIED BED BATH (FACE AND ONE ARM, HAND AND UNDERARM)

SKILL 24

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy throughout procedure with curtain, screen, or door
- 5 Removes or folds back top bedding, keeping client covered with bath blanket (or top sheet)
- 6 Removes client's gown
- 7 Tests water temperature and ensures it is safe and comfortable before bathing client, and adjusts if necessary
- 8 Washes face with wet washcloth (no soap) beginning with the eyes, using a different area of the washcloth for each eye, washing inner aspect to outer aspect
- 9 Dries face with towel, using a blotting motion
- 10 Exposes one arm
- 11 Places towel underneath arm

- 12 Using washcloth and towel, washes with soap, rinses, and dries arm, hand, and underarm
- 13 Moves client's body gently and naturally, avoiding force and over-extension of limbs and joints throughout the procedure
- 14 Puts clean gown on client
- 15 Removes bath blanket and pulls up bedcovers
- 16 Before leaving client, places signaling device within client's reach
- 17 Empties, rinses, and wipes bath basin and returns to proper storage
- 18 Places soiled clothing and linen in soiled linen containers
- 19 Leaves bed in lowest position
- 20 Avoids unnecessary exposure of client throughout procedure
- 21 Washes hands as final step

SHAMPOOS CLIENT'S HAIR IN BED

SKILL 25

- 1 Washes hands before contact with client
- 2 Identifies self to client by name and addresses client by name
- 3 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 4 Provides for client's privacy, closing procedure with curtain, screen, or door
- 5 Tests water temperature to ensure it is safe and comfortable before wetting client's hair and adds shampoo as necessary
- 6 Lowers head of bed (if elevated) and removes pillow
- 7 Protects the bed with waterproof covering
- 8 Places collection container under client's head (e.g., trough, basin, shampoo can)
- 9 Protects client's face with dry washcloth
- 10 Wets hair and applies shampoo
- 11 Lathers and massages scalp with fingertips
- 12 Rinses hair until water runs clear
- 13 Covers hair with towel
- 14 Removes collection container and waterproof covering
- 15 Before drying and combing hair, raises head of bed
- 16 Dries and combs client's hair according to client preference
- 17 Before leaving client, places signaling device within client's reach
- 18 Empties, rinses, and wipes bath basin/pitcher and returns to proper storage
- 19 Cleans comb/brush and returns hairdryer and comb/brush to proper storage
- 20 Places soiled linen in soiled linen container
- 21 Washes hands as final step

The Written Exam

The Nurse Aide Evaluator will hand out materials and give instructions for taking the examination. The Written Examination has seventy (70) multiple-choice questions. You will have two (2) hours to complete the examination. You will be told when fifteen (15) minutes are left to finish the examination. Fill in only one (1) oval on the answer sheet for each question. Markings in the testing booklet will **NOT** be accepted as answers. Your answers must appear on the separate answer sheet. Sample questions for the Written Examination are located on page 26.

Your examination will contain “pretest” questions. Pretest questions are questions on which statistical information is being collected for use in constructing future examinations. Your responses to pretest questions do not affect your score. Pretest questions are mixed in with the scored questions and are not identified.

If you give or receive help from anyone during the examination, you will be asked to return the examination and leave the room immediately. The answer sheet will not be scored and the incident will be reported to the Mississippi Department of Health, Division of Health Facilities Licensure and Certification.

All examination materials must be left in the testing room. Anyone who takes or tries to take materials or information from the testing room is subject to prosecution.

Written Exam Content Outline

Where the word “client” appears, it refers to the person *receiving* care.

I. Physical Care Skills

(32 questions)

A. Activities of Daily Living

1. Hygiene
2. Dressing and Grooming
3. Nutrition and Hydration
4. Elimination
5. Rest/Sleep/Comfort

B. Basic Nursing Skills

1. Infection Control
2. Safety/Emergency
3. Therapeutic/Technical Procedures
4. Data Collection and Reporting

C. Restorative Services

1. Prevention
2. Self Care/Independence

II. Psychosocial Care Skills

(15 questions)

A. Emotional and Mental Health Needs

B. Spiritual and Cultural Needs

III. Role of the Nurse Aide

(23 questions)

A. Communication

B. Client Rights

C. Legal and Ethical Behavior

D. Member of the Health Care Team

Sample Questions

The following questions are samples of the kinds of questions that you will find in the Written Examination. Check your answers to these questions in the box below.

- 1. In collecting urine, stool, and sputum specimens, it is necessary to:**
 - (A) have the client wash hands.
 - (B) collect specimens at bedtime.
 - (C) leave the containers at the bedside.
 - (D) wear gloves when collecting specimens.
- 2. To safely transfer a client from the bed to the wheelchair, a nurse aide should:**
 - (A) place a cushion in back of the wheelchair.
 - (B) use a footstool.
 - (C) lock the wheels on the wheelchair.
 - (D) raise the bed to high position.
- 3. How can the nurse aide BEST show respect for a client?**
 - (A) Ignore the client's requests.
 - (B) Complain to fellow workers.
 - (C) Be a good listener.
 - (D) Take angry outbursts personally.
- 4. While giving a tub bath to a client, a nurse aide is asked to help for a minute in the next room. The nurse aide should:**
 - (A) leave the client and go help.
 - (B) start to rush the client through the bath.
 - (C) stay with the client and finish the bath.
 - (D) start complaining about the short staffing.
- 5. What should a nurse aide tell a client who asks for help writing a letter?**
 - (A) "I am too busy."
 - (B) "Try and write your own."
 - (C) "It is not part of my job."
 - (D) "Let's set a time when I can help you."
- 6. When an accident happens to a client, the nurse aide should:**
 - (A) call the client's doctor.
 - (B) ask another nurse aide what to do.
 - (C) report it to the supervisor or nurse in charge immediately.
 - (D) call the client's family.

Correct Answers

1. D 2. C 3. C 4. C 5. D 6. C

Exam Day

What to Bring

You **MUST** have the following items with you when you take the examination:

- Admission Ticket
- Two (2) forms of signature identification, one of which must be photo identification. The name on your identification must be the same as the name on your application. If your name is different, you must bring proof of your name change (marriage license, divorce decree, etc.).
- Three (3) No. 2 pencils (sharpened)
- Eraser
- Your Social Security number
- Watch with a second hand
- An individual (**over 16 years old**) who will act as a client-actor/volunteer for the Skills Evaluation (client-actor/volunteer must be wearing loose-fitting clothing which makes the underarms, back and extremities accessible). Please note that if you do not bring a client-actor/volunteer, you **WILL NOT** be tested and you will forfeit your examination fee(s).

No other materials will be allowed

Security

If you give or receive help from anyone during the examination, the examination will be stopped. The incident will be reported to the Mississippi Department of Health, Division of Health Facilities Licensure and Certification, for review, and your examination will not be scored. See *Testing Policies* below.

Please note that all examination questions, each form of the examination, and all other examination materials are copyrighted by and the property of ASI. Consequently, any distribution of the examination content or materials through any form of reproduction, or through oral or written communication, is strictly prohibited and punishable by law. Anyone who removes or tries to remove examination material or information from the test site will be prosecuted.

Testing Policies

The following policies are observed at each Regional Test Site.

- If you arrive late for your examination appointment, you will not be admitted to the examination and you will be responsible for the entire examination fee.
- Cellular phones, beepers, or any other electronic devices are not permitted during testing and there is no place for storage of personal belongings at the Regional Test Site.

- You are not permitted to take personal belongings such as briefcases, large bags, study materials, extra books, or papers into the testing room. Any such materials brought into the testing room will be collected and returned to you when you have completed the examination. ASI is not responsible for lost or misplaced items.
- You are not permitted to eat, drink, or smoke during the examination.
- If you are discovered causing a disturbance of any kind or engaging in any kind of misconduct, you will be dismissed from the examination and reported to your state licensing agency. Decisions regarding disciplinary measures are the responsibility of your state licensing agency.
- No visitors, guests, pets, or children are allowed at the Regional Test Site.

Score Reporting

Test Results

After You Take the Skills Evaluation

You will be told whether you have passed or failed. The Nurse Aide Evaluator will discuss the test results with you. You will be given your own copy of the Skills Evaluation results. These results are unofficial. Ten (10) business days after the Skills Evaluation, ASI will mail you your official results (to the address provided on your application).

After You Take the Written Exam

The Nurse Aide Evaluator will score your answer sheet and advise whether you have passed or failed the Written (or Oral) Examination. These results are unofficial. Ten (10) business days after the Written Examination, ASI will send you your official results. If you fail the Written Examination, your score report will instruct you on how to re-apply.

When you pass both the Skills Evaluation and the Written Examination, you will be mailed your nurse aide certificate and your name will be placed on the Mississippi Nurse Aide Registry.

If you do not receive your official results or certificate within thirty (30) days following the NNAAP™ examination, contact ASI at (888) 204-6213.

Test results will not be given over the telephone

Lost Certificates

If you lose your certificate, you may request another copy by completing and sending ASI the *Request for Duplicate Certificate* form in the back of this handbook with a \$15.00 certified check or money order made payable to “Assessment Systems, Inc.”

Retesting Rules (How to Re-apply)

If you fail either or both parts of the NNAAP™ examination, you must complete and submit a new application and appropriate retesting fees to NACES to retest. You have three (3) opportunities to take and pass both the Written Examination and Skills Evaluation. If you do not pass the Skills Evaluation and the Written (or Oral) Examination in three tries within twenty-four (24) months of completing a nurse aide training program, you must complete a new state-approved nurse aide training program before testing again. You are required to take and pass both parts of the examination.

Your score report will tell you how to reapply to take the examination. A \$39.00 fee for the Written Examination, a \$49.00 fee for the Skills Evaluation and/or a \$49.00 fee for the Oral Examination is required to retest.

The Registry

Change of Address or Name

The Mississippi Nurse Aide Registry must be kept informed of your current address. If your address changes at any time after you apply to test, you must send a written notification of this change to ASI. If you change your address, notify ASI using the *Change of Address or Name* form or send a letter to ASI/MSNA Registry indicating your current name, address, telephone number, your certification number and your Social Security number.

If you change your name, you **MUST** provide written documentation of the change along with the *Change of Address or Name* form. This documentation may be a copy of a marriage license, a divorce decree, or other official document.

There is no charge for changing your name or address on the Registry. When you renew your certification, your new name and/or address will appear on the new wallet ID card issued to you.

Certification by Reciprocity

Reciprocity is a process by which a certified nurse aide from another state may qualify for certification in the State of Mississippi by virtue of his or her status in that other state.

You are eligible for reciprocity if you have been entered onto a nurse aide registry in a state other than Mississippi in accordance with the training and competency evaluation requirements of OBRA '87, as amended, and if you are currently listed on another state's registry as active and in good standing.

Nurse aides from out of state who are eligible for reciprocity should complete a By Reciprocity Application. You must mail the completed application, a copy of a W2 Form or paystub if you were placed on the state's registry over twenty-four (24) months ago, and \$25 fee payable to "Assessment Systems, Inc." in the form of a company check, money order or certified check to:

ATTN: MS Nurse Aide Registry
Assessment Systems, Inc.
PO Box 13785
Philadelphia, PA 19101-3785

The length of the reciprocity process depends on the time it takes your state to provide ASI with documents verifying your status as a nurse aide. ASI will process your request as soon as it receives the necessary registry verification (along with the application and fee) from the state in which you are certified. The entire process takes a *minimum* of thirty (30) days. You will then receive your certificate and be placed on the Mississippi Nurse Aide Registry, or you will receive a denial

letter indicating that additional information is required to complete the process.

An individual who has been denied reciprocity in Mississippi must retest in order to be added to the Mississippi Nurse Aide Registry. If you fail either the Written Examination or Skills Evaluation (either part of the NNAAP™ examination) on the first try, you will be required to complete a Mississippi-approved nurse aide training program before being allowed to retest under Eligibility Route E1 as a New Nurse Aide.

If you have been denied reciprocity because you have negative findings on the registry of another state, you are not eligible to take the nurse aide certification examination.

Recertification

Renewal Notification

The original nurse aide certificate from the Mississippi State Department of Health, Division of Health Facilities Licensure and Certification, is valid for twenty-four (24) months. Approximately sixty (60) days before the expiration of your certification, ASI will send a reminder notice to the mailing address listed on the Registry. It is essential for you to update your mailing address with ASI by calling (888) 204-6213 if you have a change of address. This will ensure that you receive your renewal notification in a timely manner. To be eligible for recertification, you must have worked as a nurse aide performing nurse aide services for at least eight hours (8) for monetary compensation in a nursing home or other health care setting (as indicated below) during the previous twenty-four (24) month certification period.

Recertification Process

Under federal and Mississippi state laws, candidates employed as nurse aides in nursing homes that participate in Medicaid/Medicare programs are prohibited from paying for their own recertification.

When you receive the notice from ASI, contact your current employer (who must be a nursing home, hospital, hospice, or home health agency). Your employer is required to complete the employer section of the recertification form. If you are working for an employment agency, and are placed in a long-term care facility, you must have the nursing home, hospital, hospice, or home health agency fill out the employer section of the recertification form. **An employment agency cannot fill out the employer section of this recertification form.** Employment as a private duty aide, doctor's office aide, or laboratory aide does not qualify for nurse aide recertification.

If you are not employed as a nurse aide at the time of recertification, your *last* nurse aide employer must complete the employer section of the recertification form, attesting to your employ-

ment within the last 24 months. Nurse aides not employed in a Medicaid/ Medicare nursing home at the time of recertification are permitted to pay a recertification fee of twenty-five dollars (\$25) by certified check or money order made payable to Assessment Systems, Inc. Personal checks are not accepted.

Upon recertification, you will receive a new wallet ID card indicating the new certification period. Make sure that your address and name are current in the Registry. If your address and name are not correct, ASI will not be able to notify you when your certification is about to expire. You must remember to notify the Registry *whenever* there is a change in your name or address (and include official documentation of any name change).

Nurse aides whose certifications are lapsed on the Mississippi Nurse Aide Registry are required to retest under Eligibility Route E5 as a Lapsed Nurse Aide and pass the Written Examination and the Skills Evaluation (both parts of the NNAAP™ examination) in order to become active on the Registry. If you fail either or both parts of the NNAAP™ examination on the first try, you will be required to complete a Mississippi-approved nurse aide training program before being allowed to retest under Eligibility Route E1 as a New Nurse Aide.

Mississippi Nurse Aide

Request for Duplicate Score Report, Handscore, or Duplicate Certificate

DIRECTIONS: You may use this form to request ASI to send a duplicate copy of your score report or certificate or to request a handscored answer sheet. Please print or type all information on the reverse side of this form and include the correct fees, or your request will be returned. Check the services requested:

☐ **Duplicate Score Report** ☐ **Duplicate Certificate** ☐ **Handscore**

FEE: \$15 each. Please enclose certified check or money order made payable to “ASI Processing Center.” Do not send cash. Write your ASI Identification Number found on your score report or your Social Security number on your payment.

SEND TO: Attn: MS Nurse Aide – Reports
Assessment Systems, Inc.
PO Box 13785
Philadelphia, PA 19101-3785

AMOUNT ENCLOSED:

\$_____

PLEASE COMPLETE THIS PAGE AND THE NEXT PAGE OF THIS FORM

Please complete the following form with your current name and address. All information must be complete and accurate to ensure proper processing.

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____ ASI Identification Number or Social Security Number _____

If the above information was different at the time you were tested, please indicate original information.

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____

I hereby authorize ASI to send me at the address above a duplicate of my score report.

Your Signature _____ Date _____

PLEASE COMPLETE THIS PAGE AND THE PREVIOUS PAGE OF THIS FORM

Mississippi Nurse Aide

Change of Address or Name

DIRECTIONS:

Use this form to inform the Registry of your change of address or name. Please print or type all information on the reverse side of this form. Be sure to provide all information or your request cannot be filled.

For name changes, you must also provide written documentation of your name change.

SEND TO:

Attn: MS Nurse Aide Registry
Assessment Systems, Inc.
PO Box 13785
Philadelphia, PA 19101-3785

PLEASE COMPLETE THE NEXT PAGE OF THIS FORM

C
H
A
N
G
E

Print your new name or address below:

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____

Please print your old name or address below:

Name _____

Street _____

City _____ State _____ Zip _____

Social Security Number _____ Nurse Aide Certification Number _____

Your Signature _____ **Date** _____

Please note: A copy of an official document (marriage certificate or court order) verifying your name change must accompany this request if you are notifying the Nurse Aide Registry of a change in name.